

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	8/18
O.I.P.E. CLASSIFIER		125	8/20
FORMALITY REVIEW	MP	71480	8-25-99
	unmt	108531	10/7/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	8/19/03
2	✓
3	✓
4	✓
5	✓
6	✓
7	0
8	0
9	0
10	0
11	0
12	0
13	0
14	✓
15	0
16	0
17	0
18	0
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	0
33	0
34	0
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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